

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

## PLAINTIFF

TONY B. GASKINS

## COURT CASE NUMBER

25-OPSP-640

## DEFENDANT

## TYPE OF PROCESS

CIVIL ACTION

## SERVE



NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

DAVID NOLAN, SUPERINTENDENT

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

MCI-CEDAR JUNCTION, 2405 NEW STREET, S. WASHINGTON, DC 20031

## SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

TONY B. GASKINS  
 MCI-CEDAR JUNCTION  
 P.O. BOX 100  
 S. WASHINGTON, DC 20031

Number of process to be served with this Form - 285

1

Number of parties to be served in this case

84

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

2005 MAY 23 D

RECEIVED  
U.S. MARSHAL'S  
OFFICE  
BOSTON, MASS.

Signature of Attorney or other Originator requesting service on behalf of:

Tony B. Gaskins

 PLAINTIFF  
 DEFENDANT
 

TELEPHONE NUMBER

N/A

DATE

2005 MAY 23 D

5/23/05

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**I acknowledge receipt for the total number of process indicated.  
(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin  
No. 38District to Serve  
No. 38

Signature of Authorized USMS Deputy or Clerk

Xanay Jalanee

Date

5/23/05

I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Cheryle L. Wilcox

 A person of suitable age and discretion then residing in the defendant's usual place of abode.
 

Address (complete only if different than shown above)

 Date of Service: 6/8/05 Time: 1:02 pm  
 Signature of U.S. Marshal or Deputy: Leo Leitch

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
107.50			107.50			

REMARKS:

1,5

## UNITED STATES DISTRICT COURT

FOR THE

District of

MASSACHUSETTS

TONY B. GASKINS,  
Plaintiff  
V.

U MASS. CORRECTIONAL  
HEALTH SERVICES, ET AL.,  
Defendants

CASE

**SUMMONS IN A CIVIL CASE**

C.A. 05-10858-GAO

TO: (Name and address of Defendant)

DAVID NOLAN, Superintendent  
MCI-CEDAR JUNCTION  
P.O. Box 100  
Jr. Walpole, MA 02071

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

TONY B. GASKINS, Pro Se  
MCI-CEDAR JUNCTION  
P.O. Box 100  
Jr. Walpole, MA 02071

\* or answer as otherwise required by the Federal Rules of Civil Procedure.

an answer to the complaint which is herewith served upon you, 20\* days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

SARAH ALLISON THORNTON

CLERK

*Rebecca Greenley*

(By) DEPUTY CLERK

5/11/05

DATE

